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29858 7590 01/27/2006

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Diane M. Torniali	(Depositor's name)
<i>Diane M. Torniali</i>	(Signature)
March 3, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/955,472	09/17/2001	Hing Wing To	3882/11A	7746

TITLE OF INVENTION: METHOD AND APPARATUS FOR DETERMINING AND RESOLVING MISSING TOPOLOGY FEATURES OF A NETWORK FOR IMPROVED TOPOLOGY ACCURACY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	04/27/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
DINH, KHANH Q	2151	709-223000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
	1 <u>Brown Raysman Millstein</u> <u>Felder & Steiner</u> <u>2</u> <u>LLP</u> <u>3</u> _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Micromuse Ltd.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

London, England

01 FC:1501	1400.00 OP
02 FC:1504	300.00 OP
03 FC:8001	15.00 OP

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee

Publication Fee (No small entity discount permitted)

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Authorized Signature Seth H. Ostrow

Date March 3, 2006

Typed or printed name Seth H. Ostrow

Registration No. 37,410

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